

FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number: <u>0-7302</u>	2. Fiscal Year Covered From: <u>1 / 1 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing.	
Name <u>VICTOR PALIMBO</u>	
P.O. Box, Bldg., Room No., if any	
Street <u>282 HILLSIDE AVENUE</u>	
City <u>HILLSIDE</u>	
State <u>New Jersey</u>	ZIP Code + 4 <u>07205-1803</u>
4. Name, file number, and address of labor organization.	
Name <u>TEAMSTERS LOCAL UNION 177</u>	
Labor Organization File Number <u>069-355</u>	
P.O. Box, Building and Room Number, if any	
Street <u>282 HILLSIDE AVENUE</u>	
City <u>HILLSIDE</u>	
State <u>New Jersey</u>	ZIP Code + 4 <u>07205-1803</u>
5. Position in labor organization. <u>RECORDING SECRETARY</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests
(except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State	ZIP Code + 4
7.b. Amount.	

Signature

8. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On 08/08/2005

973-923-7870

Date

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ZAZZALI, PAGELLA, NOWAK, KLEINBAUM, FRIEDMAN

Trade Name, if any: SAME

P.O. Box, Bldg., Room No., if any:

Street 1 RIVERFRONT PLAZA

City NEWARK

State New Jersey ZIP Code + 4 07102-5418

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

- a. Labor Organization
 b. Trust
 c. Employer

11.a. Nature of such dealing.

ATTORNEYS FOR LOCAL UNION

11.b. Approximate dollar value of such dealing. \$13,000 Monthly
retainer/billing

12.a. Nature of interest held or income received.

It is my recollection that I received a traditional
Christmas basket from the above referenced law firm.
I believe its value was in excess of \$25.00

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above)
or from any labor relations consultant to an employer any payment of money or other thing of value.13.a. Name and address of Employer or Labor Relations Consultant
(including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment

13.b. Is the Business an Employer

or Consultant

14.b. Amount of payment

Name of Person Filing VICTOR PALUMBO

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent; or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ZAZZALI, FAGELLA, NOWAK, KLEINBAUM, FRIEDMAN

Trade Name, if any: SAME

P.O. Box, Bldg., Room No., if any

Street 1 RIVERFRONT PLAZA

City NEWARK

State New Jersey ZIP Code + 4 07102-5418

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

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Street

City

State ZIP Code + 4

9. Business deals with:

- a. Labor Organization
 b. Trust
 c. Employer

11.a. Nature of such dealing.

ATTORNEYS FOR LOCAL UNION

11.b. Approximate dollar value of such dealing. \$13,000 monthly retainer/billing

12.a. Nature of interest held or income received.

I RECEIVED THE USE OF FOOTBALL TICKET(S) ON OCCASION FROM THE ABOVE REFERENCED LAW FIRM BUT I DO NOT RECALL THE EXACT DATE OR DATES. TO THE BEST OF MY RECOLLECTION THE VALUE OF EACH TICKET WAS APPROXIMATELY \$50.00 PER TICKET.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer

or Consultant

?

14.b. Amount of payment.